



Senate

General Assembly

File No. 54

January Session, 2005

Senate Bill No. 671

Senate, March 24, 2005

The Committee on Human Services reported through SEN. HANDLEY of the 4th Dist., Chairperson of the Committee on the part of the Senate, that the bill ought to pass.

AN ACT CONCERNING THE ANNUAL REPORT SUBMITTED BY THE COMMISSIONER OF SOCIAL SERVICES TO THE GENERAL ASSEMBLY.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 17b-9 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective October 1, 2005*):

3 (a) The Commissioner of Social Services shall submit an annual
4 report to the General Assembly no later than January first. The report
5 shall: (1) Outline the department's goals and objectives; and (2) include
6 information indicating the department's degree of compliance with all
7 legislative mandates imposed during the previous year, a timetable for
8 implementation and compliance with those legislative mandates which
9 were partially implemented or not implemented in the previous year
10 and information on the status of legislative mandates until the year
11 succeeding that in which they are fully implemented.

12 (b) Commencing with the report submitted for the calendar year

13 ending on December 31, 2005, the commissioner shall also include with
 14 the report the following information for each employer engaged in a
 15 business that employs fifty or more persons who receive state-funded
 16 medical assistance benefits: (1) The name and address of the employer;
 17 (2) the number of employees of such employer who receive state-
 18 funded medical assistance benefits; (3) the number of state-funded
 19 medical assistance beneficiaries who are spouses or dependents of
 20 employees of such employer; (4) whether such employer offers health
 21 insurance benefits to employees; and (5) the cost to the state of
 22 providing medical assistance benefits to such employees, their spouses
 23 and dependents. The report shall not include the names of any state-
 24 funded medical assistance beneficiaries, their spouses or dependents
 25 and shall be subject to the provisions of section 17b-90 and the federal
 26 Health Insurance Portability and Accountability Act of 1996. For
 27 purposes of this section, "state-funded medical assistance benefits"
 28 means any medical assistance benefits received pursuant to the
 29 operation of the state-administered general assistance program, the
 30 Medicaid program, or the HUSKY Plan, Part A, HUSKY Plan, Part B or
 31 HUSKY Plus programs.

This act shall take effect as follows and shall amend the following sections:

| | | |
|-----------|-----------------|-------|
| Section 1 | October 1, 2005 | 17b-9 |
|-----------|-----------------|-------|

HS *Joint Favorable*

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note**State Impact:**

| Agency Affected | Fund-Effect | FY 06 \$ | FY 07 \$ |
|-------------------------------|-------------|----------|----------|
| Department of Social Services | GF - Cost | Minimal | Minimal |

Municipal Impact: None

Explanation

This bill requires the Department of Social Services (DSS) to include in its annual report information concerning employers in the state who have employees who receive state medical assistance. DSS currently collects the required data as part of its application and case management operations. The department will incur additional administrative costs to collate this data for its annual report. However, these costs are expected to be minimal.

OLR Bill Analysis

SB 671

***AN ACT CONCERNING THE ANNUAL REPORT SUBMITTED BY
THE COMMISSIONER OF SOCIAL SERVICES TO THE GENERAL
ASSEMBLY*****SUMMARY:**

The bill requires the Department of Social Services commissioner to include with her annual report to the General Assembly certain information about businesses in the state that have at least 50 employees who receive state medical assistance, beginning with the 2005 calendar year report.

The required information for each business includes:

1. the employer's name and address;
2. the number of employees who receive medical assistance benefits under Medicaid, HUSKY Plan Part A or Part B, HUSKY Plus, or the State-Administered General Assistance program (SAGA);
3. the number of medical assistance beneficiaries who are spouses or dependents of the employer's employees;
4. whether the employer offers employees health insurance benefits;
and
5. the cost to the state of providing the assistance to these employees, their spouses, and dependents.

The bill prohibits the report from containing the names of any of these assistance beneficiaries, their spouses, or dependents. The report must adhere to existing state and federal laws protecting individuals' privacy and limiting the conditions under which disclosures can be made to other government agencies.

EFFECTIVE DATE: October 1, 2005

BACKGROUND

Medical Assistance Programs

Medicaid is a state-federal program that provides medical assistance to very poor families with children and elderly and disabled people.

HUSKY A (Health Insurance for Uninsured Kids and Youth) is a Medicaid program that, through managed care, serves families on Temporary Family Assistance and poor working families. Children are covered up to 185% of the federal poverty level (FPL) and their parents or relative caregivers are currently covered up to 100% of federal poverty level, with some exceptions for people with higher incomes.

HUSKY B is a managed-care, non-Medicaid, federal-state program that insures children who do not qualify for HUSKY A, have no other health insurance, and live in families with incomes above 185% of FPL. HUSKY B requires enrollees to pay varying premiums depending on income levels and provides subsidies for children in families with incomes up to 300% of FPL.

HUSKY Plus covers certain children enrolled in HUSKY B who have extensive medical needs beyond what HUSKY B covers.

SAGA is a purely state-funded program that covers very poor adults who do not qualify for Medicaid and cannot work because of their medical condition.

COMMITTEE ACTION

Human Services Committee

Joint Favorable Report

Yea 12 Nay 3